

The Social Development of Children with Mild Developmental Disabilities in Inclusive
Preschools

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Abstract

This paper examines the social development of children with mild developmental disabilities in inclusive preschools. Since the enactment of PL 94-142, also known as the Individuals with Disabilities Education Act (IDEA), the interest in inclusive preschools has increased, and they have become more prevalent in the United States. One of the main tenets of IDEA is that all children with disabilities are entitled to a free and appropriate public education (FAPE) in the least restrictive environment (LRE). Therefore, children with disabilities must be included in classrooms with typically developing children as much as possible. After reviewing the literature, I propose that there are two major factors that might explain why the social development of children with mild developmental disabilities is promoted in inclusive preschools: (a) program quality; and (b) the role of the teacher. Additionally, the literature on inclusive preschools consistently states that in order to generate the best outcomes, inclusive preschools must have high quality programs and high quality teachers. Thus, the effects of inclusive preschools are dependent on the quality of their programs and teachers. As a result, it will also be necessary to determine what characteristics constitute high quality programs and high quality teachers.

Keywords: inclusion, social development, peer interaction, high quality

The Social Development of Children with Mild Developmental Disabilities in Inclusive Preschools

Inclusive preschools are becoming more prevalent in the United States, and research has started to examine the effects of inclusion on children with mild developmental disabilities. The majority of the research has found that children with mild developmental disabilities tend to develop more advanced social skills in inclusive preschools than they do in specialized preschools (Allen & Cowdery, 2009; Brown, Odom, Li, & Zercher, 1999; Guralnick, 2010; Guralnick, Connor, Hammond, Gottman, & Kinnish, 1996; Odom & Diamond, 1998; Rafferty, Piscitelli, & Boettcher, 2003).

Vygotsky (1997) notes that it is “extraordinarily important not to isolate [children with developmental disabilities] in special closed groups,” and they should be “given as much opportunity as possible to practice interaction with other children” (p. 290). Based on my review of the literature, there are two major factors that might explain why the social development of children with mild developmental disabilities tends to be fostered in inclusive preschools: (a) program quality; and (b) the role of the teacher.

Additionally, from the research, it appears that the quality of the program and teachers plays a significant role in the effectiveness of inclusive preschools (Allen & Cowdery, 2009; Frankel, Gold, & Ajodhia-Andrews, 2010; Odom & Diamond, 1998; Rafferty et al, 2003). Buysse and Hollingsworth (2009) contend that because the number of inclusive preschools is continuing to multiply, it is imperative that the quality of the programs is high in order to create the best outcomes for all children. It is not enough just to place children with mild developmental disabilities and typically developing children together, so depending on the quality of the inclusive preschool, the degree to which the socialization of children with mild developmental

disabilities is developed varies. Thus, in my discussion of program quality and the role of the teacher, it will also be necessary to identify key characteristics of high quality programs and high quality teachers in order to establish what is needed in an inclusive preschool to produce the greatest outcomes for children with mild developmental disabilities.

Background

Before IDEA (originally known as the Education of All Handicapped Act) was passed in 1975, millions of children with intellectual disabilities were denied access to a free, appropriate, public education (FAPE) (Itkonen, 2007). IDEA guarantees and protects the rights of children with disabilities and their families, and one of the main tenets of IDEA is that all children with disabilities are entitled to FAPE in the least restrictive environment (LRE). As a result, children with disabilities must be included in classrooms with typically developing children as much as possible. Odom and Diamond (1998) commented that “all children have the right to a life that is as *normal* as possible” (p. 6). The enactment of IDEA has produced an increase in the number of existing inclusive preschools, and Buysse and Hollingsworth (2009) stated that as of 2007, 36 out of 59 states and territories reported serving 50% or more preschoolers with disabilities in general early education programs. Because of the increasing number of inclusive preschools, it is important for us to determine what makes them successful so that we can make every effort to provide all young children with a positive start to their schooling.

Allen and Cowdery (2009) asserted that “[i]nclusion is not a set of strategies or a placement issue. Inclusion is about belonging to a community” (p. 6). They also note that “[i]ncluding young children with disabilities in the educational mainstream implies equal social status with children who are developing normally” (p. 11). Vygotsky (1997) asserts that children with developmental disabilities should attend schools that “constitute a *facilitative* social

environment, i.e., one that will not overwhelm the child's weak mind with a multitude and heterogeneity of relationships, but will instead give him the opportunity to acquire essential conditional relations slowly and patiently" (p. 291). In inclusive preschools, children with and without disabilities are in a supportive environment where they learn to accept others, begin to develop a sense of who they are, and develop social skills.

It is important to note that the majority of the studies that were reviewed focused on children with mild developmental disabilities and not those with severe developmental disabilities. This can be explained by the fact that children with severe developmental disabilities are most often placed in specialized preschools (Brown & Bergen, 2002; Odom and Diamond, 1998), most likely in an attempt to secure more individualized attention due to the severity of their disabilities. Although the studies did not define the difference between mild and severe disabilities, Rafferty et al. (2003) suggested that mild and severe disabilities are differentiated by the level of functioning, and "[c]hildren with higher levels of functioning [are] more likely to be placed in inclusive classes and children with lower levels of functioning [a]re more likely to be placed in segregated classes" (p. 476).

What is High Quality?

In the studies that were reviewed, the terms *high quality program* and *high quality teacher* were consistently mentioned as essential to the effectiveness of inclusive preschools. Buysse and Hollingsworth (2009) observe that there is "substantial research evidence to suggest a causal link between program quality and developmental outcomes in young children enrolled in early education programs" (p. 121). However, what the studies failed to do was to clearly define the characteristics of high quality programs and high quality teachers.

Because of my initial difficulty with finding definitions for these terms, I originally intended to incorporate parts of an evaluative tool to analyze teaching that was developed in my Analysis of Teaching class, because I thought it could help me identify potential characteristics of high quality programs and high quality teachers. However, after some additional research, I was able to find general definitions for both terms, and as a result, I have chosen not to include the evaluative tool, as it would be an extraneous feature.

Program Quality

As I proposed, program quality is a major factor in why inclusive preschools promote the social development of children with mild developmental disabilities. Because it appears that it is necessary to have a high quality program in order to generate the best social outcomes for children with mild developmental disabilities, I will combine my discussion of program quality with the identification of the characteristics of a high quality program.

In regards to program quality, Frankel et al. (2010) stated that “[h]igh-quality programs support positive child outcomes by meeting the physical, social, emotional, language, and cognitive needs of children” (p. 5). Some of the literature expanded upon this definition by asserting that high quality programs are accredited, have low child-staff ratios, qualified staff, adaptive curriculum, and adequate support and resources (Allen & Cowdery, 2009; Buysse, Skinner, & Grant, 2001; Buysse & Hollingsworth, 2009).

Accreditation is one way of identifying a high quality program. The National Association for the Education of Young Children (NAEYC) is the major accreditation organization for inclusive preschools, and the process to gain accreditation is extensive and demanding. The initial accreditation process consists of four steps that take over a year to complete, and not all schools are successful (National Association for the Education of Young

Children, n.d.). Because the process is extensive and rigorous, the implication is that schools that succeed and obtain accreditation are of the highest quality.

Individual states can also have their own accreditation programs for preschools. For instance, Tennessee administers the Star-Quality Child Care Program. This program is for all child care facilities and not just preschools, but its intent is to identify facilities that it considers to be of high quality. Child care facilities are chosen for this program based on the results of the evaluation that takes place during the licensing renewal process. Those who qualify for the program are automatically enrolled in the program and awarded one to three stars based on their evaluation results (TN Report Card and Rated License Program, 2011).

High quality programs also have low child-teacher ratios. Because inclusive preschools have children with and without disabilities, it is important for them to have low child-teacher ratios to ensure that teachers are able to effectively manage the entire class while also providing some specialized attention to each child. In order for teachers to determine what strategies to use in the classroom, they need to learn the strengths and weaknesses of each child, and having low child-teacher ratios gives them the ability to get to know all of their students more fully. Having adequate support and resources such as training, staffing, and planning time (Allen & Cowdery, 2009) is also characteristic of high quality programs.

Another feature of high quality programs is the adaptive curriculum, which can be beneficial for children with mild developmental disabilities. Allen and Cowdery (2009) stressed the importance of curriculum that “build[s] on a child’s strengths and preferences rather than a deficit model focused on what is *wrong* with the child (p. 21). Thus, the strengths and weaknesses of each child must be identified, and the curriculum should be adapted to meet each

child's needs. Additionally, high quality programs have qualified staff, which will be included in the discussion about high quality teachers.

This is not a complete list of characteristics of high quality programs, but it provides a foundation for our understanding of high quality programs. It is worthwhile to note that Buysse and Hollingsworth (2009) attempted to summarize the numerous aspects of program quality in two categories: (a) "the quality of the curriculum and intentional teaching"; and (b) "environmental and structural quality indicators" (p. 121).

Teacher Quality

In addition to high quality programs, high quality teachers are also cited as a necessary factor in the effectiveness of inclusive preschools. High quality teachers are educated and trained to work with children with disabilities and in inclusive settings. Additionally, high quality teachers develop positive teacher-child relationships, collaborate with parents, show traits such as enthusiasm, consistency, flexibility, and facilitate peer interactions (Allen & Cowdery, 2009).

The education and training of any teacher is important, but in inclusive preschools, it is imperative that teachers are educated and trained to work with children with mild developmental disabilities in inclusive settings. Because they will be working with children that have varying ability and functioning levels, teachers need to have adequate training so that they feel comfortable and confident teaching in inclusive settings.

High quality teachers also develop positive teacher-child relationships. It is important for teachers to establish positive relationships with children because it can have an impact on children's motivation in the classroom and generate more positive outcomes (Allen & Cowdery, 2009). Teachers can develop positive relationships by being supportive and available to all

children, and being respectful and responsive to the needs of each child. These traits can build trust between teachers and children, which leads to relationships that are more positive.

Collaborating with parents is another feature of high quality teachers. Teachers not only have to develop positive relationships with children, they also need to develop positive relationships with parents. Like with children, teachers can begin to develop positive relationships with parents by being supportive, available, respectful, and responsive (Allen & Cowdery, 2009). By doing so, they can become someone who parents depend on and trust, which ultimately allows for effective collaboration between teachers and parents. High quality teachers collaborate with parents to ensure that the needs of the children are being acknowledged and met.

Other characteristics of high quality teachers are enthusiasm, consistency, and flexibility. Allen and Cowdery (2009) state that “[a] teacher’s enthusiastic support becomes a major motivation to wanting to learn more” (p. 342). If a teacher is enthusiastic and creates an engaging environment for children, children are more likely to respond positively to the teacher. Consistency is also important because children need to have structure and stability in the classroom and be able to depend on their teachers. Research shows that consistency leads to children feeling secure, and “[c]hildren who feel secure tend to be more self-confident” (Allen & Cowdery, 2009, p. 344). High quality teachers must also be flexible, especially when working in inclusive preschools. The flexibility of teachers alludes back to adaptive curriculum, which was mentioned as a characteristic of high quality programs. Thus, teachers must be responsive to the needs of each child and be able to differentiate. High quality teachers have the flexibility to adapt the curriculum to best meet the needs of all of the children.

Although it is not a comprehensive list, I have provided a glimpse at the characteristics that define high quality teachers in order to establish a foundation for our understanding of high quality teachers.

Issues

Unfortunately, inclusive preschools do not all have high quality programs and high quality teachers. In their examination of inclusive and noninclusive settings, Buysse, Wesley, Bryant, and Gardner (1999) found that “the majority of early childhood centers were of mediocre quality” (p. 313). This is troubling, because it appears that both inclusive and specialized preschool settings are not achieving high standards, which means that young children are not getting a positive start to their schooling.

Even though research shows that inclusive preschools can have positive effects on the social development of children with mild developmental disabilities, the results are typically based on children in high quality inclusive preschools. Therefore, it cannot be assumed that these results hold true in inclusive preschools that are of lower quality.

In addition, it is important to note that there is a lack of consensus regarding the definitions of high quality programs and high quality teachers (Buysse et al., 1999; Buysse & Hollingsworth, 2009), but the definitions I have provided are generally accepted. For the purpose of this paper, it will be assumed that these definitions hold true, and the inclusive preschool we are operating within is of high quality.

The Role of the Teacher

From a sociocultural perspective, young children are impressionable and prone to imitation, so it may be beneficial for children with mild developmental disabilities to be in the same classroom as typically developing children, in that they might learn basic social skills

through imitation. Vygotsky (1978) stated that “[c]hildren can imitate a variety of actions that go well beyond the limits of their own capabilities. Using imitation, children are capable of doing much more in collective activity or under the guidance of adults” (p. 88). Therefore, the social development of children with mild developmental disabilities may be advanced through peer interactions with typically developing children in inclusive preschools.

Buyse and Bailey noted that young children have not yet formed negative stereotypes, and studies have shown that attending an inclusive preschool can promote awareness and acceptance of all children with or without disabilities (as cited in Holahan & Costenbader, 2000). However, “[t]he mere act of placing children with and without disabilities together in a classroom does not ensure successful inclusion. Teachers must take that responsibility” (Allen & Cowdery, 2009, p. 18). Hestenes and Carroll (2000) assert that teachers “not only manipulate the environment to provide various types of activities for children, but they also model appropriate social interactions and facilitate social interactions between children with and without disabilities” (p. 232).

Thus, teachers in inclusive preschools must facilitate and structure peer interactions in order to help promote the social development of children with mild developmental disabilities (Allen & Cowdery, 2009; M. Brown & Bergen, 2002; W.H. Brown, Ragland, & Bishop, 1989; W.H. Brown et al., 1999; Guralnick, 2010; Hestenes & Carroll (2000); Kemple, 2004; Kemple et al., 2002; Odom & Diamond, 1998; Odom et al., 2002; Rafferty et al., 2003). Multiple studies have shown that strategies, such as group affection activities and the arrangement of the environment, can help facilitate and promote peer interactions (Allen & Cowdery, 2009; M. Brown & Bergen, 2002; W.H. Brown et al., 1989; W.H. Brown et al., 1999; Guralnick, M.J., 2010; Guralnick et al., 2006; Hestenes & Carroll, 2000; Kemple (2004); Kemple et al., 2002;

Odom et al., 2002; Odom & Wolery, 2003; Wolery & McWilliam, 1998). I will now briefly discuss these two strategies.

Group Affection Activities

One way for teachers to facilitate peer interactions is the use of a “group affection activity” (also known as a “group friendship activity”) (Brown et al., 1989; Kemple, 2004; Kemple et al., 2002; Odom et al., 2002). Odom et al. (2002) remarks that “[i]n group friendship activities, the teacher builds in an affection or prosocial component to songs, finger-plays, and/or games children play in the classroom (pp. 73-74). A modified version of the song, “If you’re happy and you know it, clap your hands”, is offered by Kemple (2004) as an example:

If you’re happy and you know it, clap your hands... If you’re happy and you know it, hug a friend... If you’re happy and you know it, smile at a friend... If you’re happy and you know it, shake hands with your neighbor... etc. (p. 93)

Kemple (2004) contends that group affection activities provide children with the “opportunity to observe peer models engaging in friendly behaviors and verbalizations, to practice friendly interactive behaviors, and to receive positive teacher attention for doing so” (p. 92). Group affection activities have been shown to help foster social interactions between children with mild developmental disabilities and typically developing children, and these social interactions could assist in the social development of children with mild developmental disabilities.

Arrangement of the Classroom

Kemple et al. (2002) reviewed studies that found that “[s]imply providing a structured space and materials that invite social pretend play may be considered a basic first step toward interaction among peers” (p. 42). By arranging classrooms into small group interest areas or

learning/activity centers, teachers can encourage children with mild developmental disabilities to interact with their typically developing peers (Allen & Cowdery, 2009; M. Brown & Bergen, 2002; W.H. Brown et al., 1989; Hestenes & Carroll, 2000; Kemple (2004); Kemple et al., 2002; Odom et al., 2002).

The areas can encompass a wide variety of interests such as art, blocks, puppets, and dramatic play, and studies indicate that the selection of toys and materials should be deliberate, and teachers should choose toys and materials that will encourage social interactions rather than those that encourage solitary play (Allen & Cowdery, 2009; Brown & Bergen, 2002; Kemple, 2004; Kemple et al., 2002). Kemple (2004) suggests that the boundaries of each area should be well defined, either by using furniture or another creative method.

It is important to allow enough time for children to play in the small group interest areas, so that they can maximize their interactions. Based on their observations and knowledge of their students, teachers can allow children to select a small group interest area, or they can intentionally group children together by assigning them to areas. By intentionally grouping children together, the teacher can ensure that children with mild developmental disabilities are given the opportunity to interact with their typically developing peers.

While it is ideal for children to initiate interactions with their peers in small group interest areas, that may not always be the case. Teachers must be aware of the social dynamics in each area, so that they can intervene if needed (Allen & Cowdery, 2009; M. Brown & Bergen, 2002; W.H. Brown et al., 1999; Kemple, 2004; Kemple et al., 2002). Gordon and Williams Browne suggest that “it can be difficult for teachers to decide when to join children at play and when to remain outside the activity. The important question is whether it will inhibit the play” (as cited in Allen & Cowdery, 2009, p. 348).

Thus, teachers cannot simply arrange the environment and expect the children to facilitate peer interactions on their own, but they also cannot be overbearing in their interventions. They must find a balance between allowing children to navigate peer interactions by themselves and providing some guidance and facilitation in order to create positive peer interactions between children with mild developmental disabilities and typically developing children.

Implications and Recommendations for Future Research

Based on the literature, it appears the social development of children with mild developmental disabilities is promoted in inclusive preschools, but they need to have high quality programs and high quality teachers. Thus, steps need to be taken in order to ensure that all inclusive preschools are of high quality and equipped to produce the best outcomes for children with and without developmental disabilities.

The most important step is the education and training of teachers to work with children with mild developmental disabilities in inclusive settings. From this paper, it is apparent that teachers play a vital role in the social development of children with mild developmental disabilities, and it is essential that they possess both content and pedagogical knowledge of working with children with mild developmental disabilities and typically developing children in an inclusive classroom.

As discussed earlier in this paper, the education and training of teachers is an indicator of a high quality teacher. But, Wolery and Bredekamp note that many general early childhood educators lack education and training in early childhood special education, and many early childhood special educators lack education and training in general early childhood education (as cited in Kemple et al., 2002).

Teachers play an integral role in inclusive preschools and it is important that they are knowledgeable and feel comfortable working with both children with mild developmental disabilities and typically developing children in inclusive settings. If teachers lack education and training, it is very likely that they will not possess a wide variety of teaching strategies, and their curriculum will not be adapted to meet the needs of all of the children. It should be a requirement that teachers have some education in working in inclusive classrooms, and they should continue to take advantage of professional development opportunities to further expand their knowledge.

There also needs to be more research on the social development of children with mild developmental disabilities in inclusive preschools. The majority of the studies that were reviewed were on a small-scale with a limited number of participants, and studies need to be done on a larger scale with a more significant sample size in order further verify the findings of the existing research. Because the studies were typically performed on a small-scale, it is difficult to know whether it is appropriate to generalize the results.

Additionally, researchers should agree upon a standard definition of a high quality program and a high quality teacher. Although there are some characteristics that seem to be generally accepted as indicators of quality, there is an overall lack of consensus, which is problematic for research. If researchers have different ideas of what a high quality program and a high quality teacher are, they may have conflicting findings. There needs to be a consensus on what constitutes high quality programs and high quality teachers so that we are not left wondering which definition is being used anytime it arises.

Even though the majority of the studies show that inclusive preschools have positive social effects on children with mild developmental disabilities, the results are generally based on children in high quality preschools. Therefore, it cannot be assumed that these results hold true

for all inclusive preschools. By studying inclusive preschools who have a reputation as being high quality, researchers could possibly attempt to determine what exactly it is about these high quality programs and high quality teachers that produces the positive effects on children with mild developmental disabilities.

As a follow-up to this paper, I would consider investigating the characteristics of high quality programs and high quality teachers in specialized preschools and comparing them to those in inclusive preschools to see if there are any differences in what is considered high quality between the two settings. I would also be interested to find out if there is consensus on the definition of high quality in specialized preschools.

Furthermore, as I discussed at the beginning of the paper, the literature suggests that children with mild developmental disabilities who attend inclusive preschools tend to have more advanced social skills than those in specialized preschools (Allen & Cowdery, 2009; Guralnick et al., 1996; Odom & Diamond, 1998; Rafferty et al., 2003), and I am curious to know exactly why. Is it the inclusive setting? Is it the teacher? What is it about inclusive preschools that cause more positive social outcomes than specialized preschools for children with mild developmental disabilities?

I am also interested in examining issues regarding funding in inclusive preschools, because from my review of the literature, I get the impression that a lack of support and funding is another problem that affects the quality of inclusive preschools. As previously mentioned, one characteristic of a high quality program is accreditation, but the cost to gain and maintain accreditation through NAEYC is expensive, and many schools cannot afford to be accredited. Although inclusion is technically mandated by the tenets of IDEA, schools often struggle to secure funding. Frankel (2004) noted that in her interviews, administrators brought up

“inequitable funding at the federal, state/provincial, and local levels” (p. 312), and went on to explain that there were different requirements for funding at each of the levels, which complicated the funding process. Additionally, because there is often a lack of funding, schools sometimes have to operate with limited staff, which puts more pressure on the teachers and takes away their support system.

Lastly, I am interested in examining the long-term effects that inclusive preschools have on children with mild developmental delays. After attending inclusive preschools, what happens to children with mild developmental delays when they enter elementary school? I would be curious to see how they perform socially and academically, and if they continue to participate in inclusive settings, or if they move to more specialized settings. And, how much of the placement is their decision and how much of it is based on what resources the school has or is willing to offer.

Reflection/Conclusion

The enactment of IDEA provided the opportunity for children with disabilities to attend schools with typically developing children as much as possible, so as not to disrupt the learning process. As a result, the number of inclusive preschools in the United States has grown, and will probably continue to grow. When I began my research, I was encouraged by the general sentiment that inclusive preschools tended to promote the social development of children with mild developmental disabilities. As this paper has discussed, the program quality teacher quality are essential, but unfortunately, not all inclusive preschools are of high quality.

Although this paper has suggested that program quality and the role of the teacher are major contributors to the social development of children with mild developmental disabilities in inclusive preschools, I am still trying to determine how inclusive preschools should be set up so

that they produce the most positive social effects on children with mild developmental disabilities. All children deserve a high quality education, and it is our duty to ensure that they have the proper education, support, and resources needed to help them reach their full potential.

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